

02 997419

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	LS	32	12/10
FORMALITY REVIEW	Si	1128	12/14/01
RESPONSE FORMALITY REVIEW	SG	1077	4/4/02

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 = _____ Allowed I _____ Interference
 - (Through numeral) _____ Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date
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ST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

11 SET INSIDE

11-24/04/02

Ref 2/6/